

**ILLINOIS EMERGENCY MEDICAL SERVICES FOR CHILDREN
ADVISORY BOARD
Meeting Minutes
March 6, 2015**

Present: Kevin Bernard (EMS System Coordinator)*, Mark Cichon (EMSC)*, Kathy Disher (DCFS)*, Darcy Egging (IL ENA)*, Susan Fuchs, Chair (Natl. Assn EMS Physicians), Jeanne Grady (IL DSCC)*, Mike Hansen (IL Fire Chiefs Assn)*, Amy Hill (Safe Kids IL), Ruth Kafensztok (Loyola), Kevin Katzbeck (Family representative), Dan Leonard (EMSC), Evelyn Lyons (IDPH/EMSC), Maura McKay (IL AAFP), Laura Prestidge (EMSC), Teresa Riech (ICAAP)*, Bonnie Salvetti (ANA-Illinois)*, Greg Scott (IEMTA)*, Christina Swain (EMSC), Kristen Tindall (IHA), Michael Wahl (MCHC), Terry Wheat (Pediatric Rehab)*, J. Thomas Willis, Co-chair (IL Fire Fighters Assn)

Excused: Paula Atteberry (IDPH), Young Chung (American Red Cross), Joseph Hageman (ICAAP), Herbert Sutherland (ICEP), Kathy Swafford (ICAAP), Carolynn Zonia (IL SMS)

Absent: Glendean Burton (IDHS), Roy Harley (Prevent Child Abuse Illinois), Victoria Jackson (School Health Program, IDPH), Michael Pieroni (IL State Ambulance Assn), Scott Tiepelman (Region 4 Coalition)

*Via teleconference

TOPIC	DISCUSSION	ACTION
Call to Order	Susan Fuchs called the meeting to order at 10:07am	None
Introductions	Introductions were made.	None
Review of 12/19/14 Meeting Minutes	The December 19, 2014 meeting minutes were reviewed and approved. Tom Willis made a motion for approval; Mike Wahl seconded the motion. All in attendance agreed to approve the minutes.	Minutes approved
Announcements/ Updates	<p>Susan Fuchs reviewed the following announcements/updates:</p> <ul style="list-style-type: none"> ▪ 2015 Ron W. Lee, MD – Excellence in Pediatric Care Awards, nominations due date 3/20/2015 ▪ <i>Injury Prevention Health Observances - 2015</i>, Injury & Violence Prevention Program, IDPH ▪ <i>State of Illinois Trauma Center Feasibility Study</i>, IDPH, 1/2/2015 ▪ Fact Sheets: <ul style="list-style-type: none"> ○ <i>Drunk Driving in Illinois</i>, CDC, 12/2014 ○ <i>Restraint Use in Illinois</i>, CDC, 12/2014 ○ <i>Circumstances surrounding adolescent and young adult suicide among those not receiving mental health treatment at time of death</i>, Lurie Children’s Hospital, 2/2015 ▪ Other organizational reports/updates <ul style="list-style-type: none"> ○ DCFS – Kathy Disher noted the DCFS asthma education program is currently on hold pending funding status, however DCFS nurses are assessing asthma medical records to evaluate vaccination compliance. Bridging the Gap conference focusing on asthma is planned April 16th. ○ MCHC – Mike Wahl noted that the Illinois Poison Center has over 500 activities planned during the month as part of IPC Prevention Month. Undergrad students are being used to provide family education. An effort is underway with legislators to decrease prescription drug abuse. Maura McKay noted that she is on the DuPage Workgroup that is working on this area, and they have found that dentists and oral surgeons are a group that need more education in this area. ○ SafeKids – Amy Hill identified that they lost IDOT funding last year. They will be distributing 700-1000 car seats this year. 	<p>Board members are asked to share this information within your organizations</p> <p>Send any new announcements to Evelyn Lyons for future meetings</p>

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	<ul style="list-style-type: none"> ▪ Educational Opportunities <ul style="list-style-type: none"> ○ <i>Region IV EMSC Conference</i> – 4/11/2015, Anderson Hospital, Maryville ○ <i>Pediatric Symposium 2015</i>, 5/1/2015, McHenry County College, Crystal Lake ○ <i>Focus on the Future: Emerging Threats and Strengthening Capacity</i> - 2015 Integrated Public Health & Healthcare System Preparedness Summit, 6/16-18/2015, Schaumburg ○ <i>2015 National Pediatric Disaster Coalition Conference</i>, 11/2-4/2015, Scottsdale, AZ ○ <i>EMSC Online Courses</i> - https://www.publichealthlearning.com ○ Other educational opportunities at www.luhs.org/emsc/special.htm 	
IDPH, Division of EMS & Highway Safety Report	<p>Evelyn provided the following report for Paula Atteberry who was not able to attend today’s meeting:</p> <ul style="list-style-type: none"> ▪ <i>Veterans Bridge Program Curricula</i>: The goal is to offer programs to Veterans in fall 2015. The Department has three veterans who qualify for testing at the EMT-B level, and there are two locations willing to perform psychomotor skill testing to determine if the candidates will qualify for the State exam. ▪ <i>Scope of Practice Survey</i>: Both Scope of Practice surveys have been completed and returned to the Department. IDPH will summarize the findings and work with the State Education committee to build out the necessary educational components. Information will be provided to EMS Medical Directors and EMS System Coordinators once Administrative rules for HB3414 are submitted for legal review. ▪ <i>National Registry Imports</i>: The Department is still working with the licensing vendor and our IT staff to complete this process. ▪ <i>Heartsaver AED Grants</i> - The Department awarded \$33,086 from the FY 15 Heartsaver AED Grant. The Department received 71 qualified applications and awarded 71 Heartsaver AED Grants. ▪ <i>Regulatory</i> - The Rural Upgrade rule amendments are at the EMS Advisory Council for review and comment at the March 10th meeting; the Department has had several meetings with subject matter experts to amend the EMS rules to reflect the EMS new education standards; Stroke rule and EMSC rule amendments are at IDPH legal for review. ▪ <i>EMS Grants</i> - FY16 EMS Assistance Fund Grant applications now available on IDPH Electronic Grant Administration and Management System (EGrAMS). Applications due by Friday April 3, 2015. ▪ <i>Trauma Program Update</i> - Legislative and Planning will re-convene in March to work on current rule revisions; Finalizing the RFP for trauma registry; Working on trauma data requests; Department was working on a multi-tiered trauma bill but it has been held due to concerns by the Illinois Hospital Association stating its membership is opposed to the changes that might affect current funding; the Department encourages hospital trauma program staff to discuss the need to expand the Illinois Trauma program with your CEO’s/CFO’s to have them voice their concerns to Illinois Hospital Association. ▪ <i>Stroke</i> - Applications are processed as received; Currently 96 hospitals with Stroke designation by IDPH. Fifty two are Primary Stroke Centers; forty four are Emergency Stroke Ready Hospitals. 	<p>Board members are asked to share this information within your organizations.</p>

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	<ul style="list-style-type: none"> ▪ <i>Hospital Bypass System</i> - Hospital bed and other resource count data flow from Chicago to the state's system, and statewide data then flows to the federal HAvBED site. Work remains to automate the process of collecting Chicago hospital status information since Chicago hospitals have to manually enter their data into two systems; Plans to participate in a national reporting drill in May. ▪ <i>Pre-hospital database</i> - Schematron file is in final testing phase and should be posted online by end of the month. Then software vendors will be able to develop NEMSIS Version 3 compliant products for their Illinois customers; Work progresses on EMS data access websites for EMS System Coordinators and the general public. Currently projecting April launch for coordinator site and June launch for public site; Fewer than 2 percent of reports for calendar year 2014 runs coming in on bubble sheets. ▪ <i>Testing Updates</i> - Revisions to both EMT-Basic and Paramedic exams are complete, with changes to both questions and distracters. Candidates will be able to see test scores immediately after exams are taken. ▪ <i>Test results for the 4th qtr. of 2014 were reviewed.</i> ▪ <i>EMS Licensing</i> - New License Processed YTD = 879; Renewals Processed YTD = 1508; Reciprocity Processed YTD = 72; EMS Licensing is currently running a backlog of 2 – 3 weeks for the issuance of new licenses. EMS Licensing will begin working overtime on 03/02/2015 to reduce the backlog. ▪ <i>GLSuites</i> - Initial T-Card Correspondence is finally on the LIVE system. A pilot program will commence in early March for NREMT certified EMT's only with four EMS Systems. Will continue to work with GLSolutions to add software for ECRN, EMD, PHRN, LI licenses to the Online Fee Payment System. This will change the online service fee from a fixed fee to a percentage fee. The vendor has not successfully fixed all of the functionality of our test environment causing delays in testing online fee payment enhancements. The vendor and department continue to work on Emergency Medical Dispatch licensing upgrades. Stretcher Van Licensing software updates are pending completion by GLSolutions and assignment of its merchant ID with the Treasurer's Office and Forte (Gateway system). 	
Election of Advisory Board Chair and Vice-Chair	<p>Mark Cichon identified that nominations for the Board Chair and Vice-Chair positions are open, however there were no other nominees. Tom Willis motioned to nominate Susan Fuchs to continue to serve as EMSC Advisory Board Chair and Greg Scott seconded the motion. Sue Fuchs motioned to nominate Tom Willis to continue to serve as Vice-Chair, and Greg Scott seconded the motion. Both Sue and Tom were thanked for their continued leadership.</p>	<p>Sue Fuchs and Tom Willis will continue to serve as Board Chair and Vice-Chair</p>
Pediatric Preparedness Workgroup	<p>Laura Prestidge reported on the following:</p> <ul style="list-style-type: none"> ▪ <i>Burn Surge Annex project update</i> –The Burn Management poster and pocket card are finalized and have been provided to each of the 11 RHCCs for statewide distribution. The information in both documents are in line with ABA guidelines. Two online table-top exercises are planned to test the burn surge annex for the first time. The exercise on 3/10 targets hospitals in northern Illinois; and the 3/24 exercise is for hospitals in central/southern Illinois. ▪ <i>DRAFT Amoxicillin dosing brochure</i>. This document is under development, and would provide parents with information on how to create a liquid suspension in the event that only capsules are available. ▪ <i>DRAFT REVISED Pediatric Preparedness Guidelines</i> – An MPH student is revising this document to 	

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	<p>update with more current information and to expand the scope of the document.</p> <ul style="list-style-type: none"> ▪ Illinois Department of Human Services (IDHS) Child Care Preparedness Taskforce – This taskforce will meet again next Friday, and continue to develop a state plan for day care centers in the event of a disaster. In addition, the EMSC Pediatric Preparedness Workgroup is revising a planning guide for day care centers as a component of this project. 	<p>Send comments re any of the preparedness to Laura at lprestidge@luc.edu</p>
<p>Facility Recognition and QI Committee</p>	<p>Sue Fuchs and Evelyn Lyons reported:</p> <ul style="list-style-type: none"> ▪ Region 2 renewal applications are under review; surveys will be scheduled spring/early summer. ▪ Region 8 hospitals had an educational session on February 12, 2015 at Hinsdale Hospital. ▪ Proposed changes to PCCC/EDAP/SEDP regulations are pending IDPH Legal review. ▪ Interfacility Transfer Workgroup project – Carolynn Zonia has recently convened a workgroup to develop guidelines and tools related to the communication/quality improvement information sharing between referral and receiving hospitals. This continues to be a challenging area for hospitals. ▪ Current participation in facility recognition (110 hospitals) <ul style="list-style-type: none"> ○ PCCC/EDAP level = 10; EDAP level = 87; SEDP level = 13 ○ Note: In 2013, there were approximately 1 million ED visits for 0-15 years of age. 78.1% of these visits took place in a PCCC, EDAP or SEDP. Of the 1 million, approximately 30,000 required admission with 94.4% of these admissions taking place in a PCCC, EDAP, or SEDP facility (Source: Illinois Hospital Assn Compdata) ▪ Sue reviewed the following Regional QI updates: <ul style="list-style-type: none"> ○ Region 1: Working to integrate use of PEWS in triage to achieve quicker intervention when needed. Hospitals in region at different phases in this process. Triage Education/Competency and Pediatric Treatment Guidelines were reviewed for possible quality measures. ○ Region 2: Work continues on reporting child abuse and neglect cases to child’s Primary Care Provider. A new topic being considered is re-unification of children to their parents after a disaster. The region is also preparing for their facility recognition renewal process in 2015. ○ Region 3: QI project regarding door-to-intervention for long bone fractures has been made into a Core Measure, with data collected by other hospital personnel. A possible new project is a “Back to Sleep” campaign due to a number of pediatric deaths related to this issue. ○ Region 4: Delays in transfers to tertiary care facilities were discussed. Reviews of transfer cases continue by two St. Louis Children’s hospitals, and decreases have been found in use of CT scans prior to transfer. Work is proceeding on the Region 4 EMSC conference in April. ○ Region 5: Audits of child abuse cases continue, including appropriate DCFS reporting. Pediatric suicide cases were discussed. ○ Region 6: A brief survey is being developed to ask parents how they obtain temperatures and measure medication doses at home, with plans to follow up with educational materials. ○ Region 7: The Region VII Pediatric Priorities Conference was held earlier in January, and it was well-received. A monitor tool is proceeding regarding fever management in pediatric patients. The monitor includes treatment at home, ED assessment, and ED treatment. ○ Region 8: Safe-to-Sleep materials were distributed at all facilities in the region. Data collection continues regarding pediatric cardiac arrests. Also a new project is proceeding regarding obtaining BP in young children, including an assessment of current practices. 	<p>FYI</p>

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	<ul style="list-style-type: none"> ○ Region 9: The region discussed a potential indicator in the management of burn cases, focusing on ED management and interfacility transfer. ○ Region 10: The region is continuing its data collection for an Abdominal Pain monitor for ages 3-15, looking at assessment, imaging, interventions, time to pain meds, and reassessment. A full year of data should be available from all facilities by the next quarter. ○ Region 11: Region 11 continues to work with Mental Health QI data, including the availability of crisis workers, psych assessments in the ED, and EMS transport. 	
EMSC Targeted Issue Grant	Evelyn noted that work on the <i>Facility Recognition/Categorization Toolkit</i> has been put on a back-burner due to other priorities. As work proceeds, updates will be provided at future board meetings.	FYI
Data Initiatives	<p>Dan Leonard reported:</p> <ul style="list-style-type: none"> ▪ <i>EMS Data Reporting System</i> – Preliminary work is underway with new 2013 traffic crash data obtained from IDOT; and 2013 data has been requested from IDPH. ▪ <i>Traffic Crash “Quick Facts” Fact Sheets</i> – 2013 crash data has been obtained from IDOT and preliminarily checked for development of the fact sheets. ▪ <i>Data Quality Studies</i> – EMSC has worked to support IDOT’s CODES program by devising a strategy to obtain missing information on selected key data elements for fatal crash records based on data potentially available in health/medical databases. An Access database was developed to automate the processing of ITR records prior to linkage, and linkage software has been successfully tested. ▪ <i>DRAFT Declines in Childhood Motor Vehicle Crash Pedestrian and Pedalcyclist Victims in Illinois, 2000-2012</i> – Dan reviewed this draft report that he developed using IDOT crash data, and discussed the declines seen in the childhood pedestrian and pedalcyclist population. There was discussion that this may be related to less children riding bicycles. Suggestions to discuss with injury prevention experts and to look into whether bicycle sales have declined for younger population. Tom Willis motioned to approve the report and Maura seconded the motion. All approved 	FYI
School Nurse Initiatives	<p>Chris Swain reported on the following: Work continues to progress on the SNEC curriculum revision. As chapter content is revised, it is then forwarded to the project copy editor. The goal is to have a completed 5th Edition for the summer courses. Nine SNEC courses are scheduled this summer in the following locations:</p> <ul style="list-style-type: none"> ▪ June 15, 16 & 17 – Peoria ▪ June 16, 17 & 18 – Oak Brook ▪ June 22, 23 & 24 – Rockford ▪ June 29, 30 & July 1 – Springfield ▪ July 6, 7 & 8 – Maryville ▪ July 7, 8 & 9 – Joliet ▪ July 13, 14 & 15 – Elgin ▪ July 20, 21 & 22 – Chicago ▪ July 27, 28 & 29 – Highland Park 	FYI
Pediatric Prehospital Committee	<p>Sue Fuchs presented the following protocols that underwent revision by the Pediatric Prehospital Committee. She noted that the NASEMSO prehospital protocols are being used for guidance:</p> <ul style="list-style-type: none"> ▪ Altered Level of Consciousness (BLS) – motion to approve by Tom Willis; seconded by Mike Wahl 	The Environmental

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	<ul style="list-style-type: none"> ▪ Altered Level of Consciousness (EMR)–motion to approve by Tom Willis; seconded by Mike Wahl ▪ Pediatric Environmental Hyperthermia (BLS/EMR) – there was discussion regarding the inconsistency in use of axilla and armpits. Recommended to use armpits since the EMR personnel may recognize this term easier. This will be taken back to the committee. ▪ Pediatric Hypothermia (ALS/ILS) – motion to approve by Tom Willis; seconded by Jean Grady ▪ Pediatric Hypothermia (BLS) – motion to approve by Tom Willis; seconded by Maura McKay 	Hyperthermia and the Hypothermia protocols will undergo review again by the Pediatric Prehospital Committee.
EMS Region 4 Coalition	Scott Tiepelman has retired. The Region 4 Coalition is being requested to identify a new representative. No report provided.	No report
National EMSC Assessments	Evelyn noted that we are pending fact sheet revisions from NEDARC for these assessments, and then will be able to disseminate information related to the hospital Pediatric Readiness Assessment and the EMS Survey.	FYI
Publications/ Presentations Update	<ul style="list-style-type: none"> ▪ <i>Emergency Department Management of Pediatric Unprovoked Seizures and Status Epilepticus in the State of Illinois.</i> Journal of Child Neurology. Taylor C, Piantino J, Hageman J, Lyons E, Janies K, Leonard D, Kelley K, and Fuchs S. ▪ <i>Emergency Department Evaluation and Management of Children with Simple Febrile Seizures.</i> Clinical Pediatrics. Carapetian S, Hageman J, Lyons E, Leonard D, Janies K, Kelley K, Fuchs S. ▪ Lyons E, Marchetti J, Prestidge L, Scott L. Burn Surge Response: Local, Regional, State and Multi-State Strategies to Manage a Mass Casualty Burn Incident. Abstract accepted for panel presentation at the 2015 Public Health Preparedness Summit, National Assn of County and City Health Officials (NACCHO). Atlanta, GA. April 14-17, 2015. 	
Other	No other reports provided.	No action
Upcoming meetings	<p>The next meetings are scheduled as follows. All meetings will continue to be held from 10am – 12pm at the Illinois Hospital Association.</p> <ul style="list-style-type: none"> - Friday, June 5th - Friday, September 18th - Friday, December 18th 	A meeting reminder and electronic invitation will be sent to all board members
Adjournment	Meeting was adjourned at 11:50am.	None

Meeting minutes submitted by E. Lyons